Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 1 of 60

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin iden	e the name that is on a government-issued ure identification (for mple, your driver's use or passport). g your picture tification to your the trustee.	Ryan First name Thomas Middle name Stern Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ude your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security nber or federal vidual Taxpayer ntification number	xxx-xx-4308	

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 2 of 60

Case number (if known)

Debtor 1 Ryan Thomas Stern

		About Debtor 1:	Al	bout Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.		☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	В	usiness name(s)		
		EINs	EI	Ns		
5.	Where you live		If	Debtor 2 lives at a different address:		
		6115 Hillcrest Road Cary, IL 60013				
		Number, Street, City, State & ZIP Code	Nu	umber, Street, City, State & ZIP Code		
		McHenry				
		County	Co	punty		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	in	Debtor 2's mailing address is different from yours, fill it here. Note that the court will send any notices to this ailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Nu	umber, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Ci	heck one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 3 of 60

Case number (if known) Debtor 1 Ryan Thomas Stern

ar	Tell the Court About	Your B	ankruptcy Ca	ise				
7.	The chapter of the Bankruptcy Code you are	Chec (Form			of each, see <i>Notice Required by</i> f page 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for e box.	or Bankruptcy	
	choosing to file under	Chapter 7						
		□ с	hapter 11					
		□ с	hapter 12					
		С	hapter 13					
3.	How you will pay the fee	•	about how yo	ou may pay. Typ attorney is subi	pically, if you are paying the fee yo	k with the clerk's office in your local court ourself, you may pay with cash, cashier's alf, your attorney may pay with a credit ca	check, or money	
				o pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Paying Fee in Installments (Official Form 103A).				
			I request that but is not req applies to you	at my fee be wa uired to, waive y ur family size ar	nived (You may request this option your fee, and may do so only if yound you are unable to pay the fee in	n only if you are filing for Chapter 7. By la ur income is less than 150% of the officia n installments). If you choose this option, cial Form 103B) and file it with your petitio	I poverty line that you must fill out	
) .	Have you filed for bankruptcy within the	■ No).					
	last 8 years?	☐ Ye	es.					
			District		When			
			District		When	Case number		
			District		When	Case number		
10.	Are any bankruptcy cases pending or being	■ No)					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	2 S.					
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	□No	Go to I	ine 12.				
	residence:	■ Ye	es. Has yo	our landlord obta	ained an eviction judgment agains	t you and do you want to stay in your resi	idence?	
				No. Go to line	12.			
				Yes. Fill out <i>In</i> bankruptcy per		Judgment Against You (Form 101A) and t	file it with this	

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 4 of 60

		Document	Page 4 01 00	
Debtor 1	Ryan Thomas Stern		Case number (if known)	

ar	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to I	Part 4.				
		☐ Yes.	Name	and location of bus	siness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any				
	If you have more than one sole proprietorship, use a		Numbe	er, Street, City, Stat	te & ZIP Code			
	separate sheet and attach it to this petition.		Check	the appropriate bo	ox to describe your business:			
	•				ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))			
				None of the above	e			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	ou are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropria adlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement erations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the proced 1 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am n	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.				
		☐ Yes.	I am fil	ling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
	Do you own or have any		Trazar ao	uo 1 10porty 01 7111	, report, rua resuc immounte rue income			
	property that poses or is alleged to pose a threat of imminent and	■ No. □ Yes.	What is t	he hazard?				
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			ate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?	Number Circus City Chate 9 7 in Code			
					Number, Street, City, State & Zip Code			

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 5 of 60

Debtor 1 Ryan Thomas Stern

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1	Ryan Thomas Ste	rn	Document	Page 6 of 60 Case number	'l' (if known)
Part	6.	Answer These Questi		ortina Purnoses		
		kind of debts do	16a. Ai	re your debts primarily consum dividual primarily for a personal, f		ned in 11 U.S.C. § 101(8) as "incurred by an
				No. Go to line 16b.		
				Yes. Go to line 17.	s debts? Business debts are debts	that you incurred to obtain
					t or through the operation of the bus	
				No. Go to line 16c.		
				Yes. Go to line 17.		
			16c. St	ate the type of debts you owe tha	at are not consumer debts or busines	s debts
17.		ou filing under ter 7?	□ No. I a	nm not filing under Chapter 7. Go	to line 18.	
	after prope	ou estimate that any exempt erty is excluded and			estimate that after any exempt property distribute to unsecured creditors?	erty is excluded and administrative expenses
		administrative expenses are paid that funds will be available for distribution to unsecured creditors?		No		
	be av distri			Yes		
18.		many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000
	•	you estimate that you owe?	□ 50-99		□ 5001-10,000 □ 10,001-25,000	☐ 50,001-100,000 ☐ More than100,000
			□ 100-199 □ 200-999		10,001-25,000	☐ More than 100,000
19.		much do you	\$0 - \$50 ,	000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	be we	ate your assets to orth?	\$50,001		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			Δ ψ100,001 ψ000,000		□ \$100,000,001 - \$500 million	☐ More than \$50 billion
20.		much do you ate your liabilities	= \$0 - \$50,	000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be		□ \$50,001		□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			□ \$100,001 □ \$500,001		□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Part	t 7:	Sign Below				
For	you		I have exam	ined this petition, and I declare u	nder penalty of perjury that the inform	nation provided is true and correct.
					aware that I may proceed, if eligible, vailable under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, loose to proceed under Chapter 7.
					or agree to pay someone who is no be required by 11 U.S.C. § 342(b).	t an attorney to help me fill out this
			I request reli	ef in accordance with the chapte	r of title 11, United States Code, spe	cified in this petition.
			bankruptcy of and 3571.	case can result in fines up to \$250		or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519
			Ryan Thor		Signature of Debto	r 2
			Signature of	Deptor 1		
			Executed on	August 15, 2016 MM / DD / YYYY	Executed on	/ DD / YYYY

Debtor 1 Ryan Thomas Stern Document Page 7 of 60 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael T. Barrett, Sr.	Date	August 15, 2016	
Signature of Attorney for Debtor		MM / DD / YYYY	
Michael T. Barrett, Sr.			
Printed name			
James D. Huls & Associates			
530 Rockland Road			
Crystal Lake, IL 60014			
Number, Street, City, State & ZIP Code			
Contact phone 815-455-4755	Email address	michael@jdhuls.com	
6200869			
Bar number & State			

	DOCUM	eni Paue 8 01 80		
rmation to identify your	case:			
Ryan Thomas Ste	ern			
First Name	Middle Name	Last Name		
First Name	Middle Name	Last Name		
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
				☐ Check if this is an amended filing
	Ryan Thomas Sterist Name	Ryan Thomas Stern First Name Middle Name First Name Middle Name	Ryan Thomas Stern First Name Middle Name Last Name First Name Middle Name Last Name	Ryan Thomas Stern First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,348.91
	1c. Copy line 63, Total of all property on Schedule A/B	\$	3,348.91
Pai	t 2: Summarize Your Liabilities		
			abilities : you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	3,443.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	26,732.71
	Your total liabilities	\$	30,175.71
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,084.18
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	885.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Ryan Thomas Stern Document Page 9 of 60 Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,228.18

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total cl	aim
1 toll 1 are 1 on conceans 27, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	3,443.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,443.00

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 10 of 60

		Document	Page 10 of 60	
Fill in this infor	mation to identify yo	our case and this filing:		
Debtor 1	Ryan Thomas	Stern		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the	e: NORTHERN DISTRICT OF I	LLINOIS	
Casa sumbar				
Case number _				☐ Check if this is an amended filing
				amenaea ming
<u>Official Fo</u>	rm 106A/B			
Schedul	e A/B: Pro	perty		12/15
		<u>. , , , , , , , , , , , , , , , , , , ,</u>	. If an asset fits in more than one category, list the a	
information. If mor Answer every ques	e space is needed, atta stion.		eople are filing together, both are equally responsible in the top of any additional pages, write your name an unit of the control of the con	
		-		
1. Do you own or l	have any legal or equit	able interest in any residence, build	ling, land, or similar property?	
■ No. Go to Par	rt 2.			
☐ Yes. Where i				
L res. Where i	s the property:			
Part 2: Describe	Your Vehicles			
3. Cars, vans, tr ■ No	ucks, tractors, spor	t utility vehicles, motorcycles		
■ No				
□ res				
4. Watercraft, ai				
•	•	•	vehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories	
•	•	•		
Examples: Boa	•	•		
Examples: Boa	•	•		
Examples: Boa	•	•		
Examples: Boa ■ No □ Yes 5 Add the dollar	ats, trailers, motors, po	ersonal watercraft, fishing vessels on you own for all of your entric	es from Part 2, including any entries for	\$0.00
Examples: Boa ■ No □ Yes 5 Add the dollar	ats, trailers, motors, po	ersonal watercraft, fishing vessels on you own for all of your entric	s, snowmobiles, motorcycle accessories	\$0.00
Examples: Boa ■ No □ Yes 5 Add the dolla pages you ha	ats, trailers, motors, po ar value of the portic ave attached for Par	ersonal watercraft, fishing vessels on you own for all of your entric t 2. Write that number here	es from Part 2, including any entries for	\$0.00
Examples: Boa No Yes Solution Add the dollar pages you have Part 3: Describe	ar value of the portic ave attached for Par	ersonal watercraft, fishing vessels on you own for all of your entrie t 2. Write that number here	es, snowmobiles, motorcycle accessories es from Part 2, including any entries for	· · ·
Examples: Boa No Yes Solution Add the dollar pages you have Part 3: Describe	ar value of the portic ave attached for Par	ersonal watercraft, fishing vessels on you own for all of your entric t 2. Write that number here	es, snowmobiles, motorcycle accessories es from Part 2, including any entries for	\$0.00 Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Boa No Yes Add the dolla pages you have been been been been been been been be	ar value of the portic ave attached for Par Your Personal and Ho have any legal or eq	ersonal watercraft, fishing vessels on you own for all of your entrice t 2. Write that number here ousehold Items uitable interest in any of the fo	es, snowmobiles, motorcycle accessories es from Part 2, including any entries for	Current value of the portion you own? Do not deduct secured
Examples: Boa No Yes Add the dolla pages you have been been been been been been been be	ar value of the porticave attached for Par Your Personal and Hohave any legal or equotes and furnishing ajor appliances, furnit	ersonal watercraft, fishing vessels on you own for all of your entrie t 2. Write that number here ousehold Items uitable interest in any of the fo	es, snowmobiles, motorcycle accessories es from Part 2, including any entries for	Current value of the portion you own? Do not deduct secured
Examples: Boa No Yes Solution Add the dollar pages you have the pages you have the page of the page	ar value of the porticave attached for Par Your Personal and Hohave any legal or equotes and furnishing ajor appliances, furnit	ersonal watercraft, fishing vessels on you own for all of your entrie t 2. Write that number here ousehold Items uitable interest in any of the fo	es, snowmobiles, motorcycle accessories es from Part 2, including any entries for	Current value of the portion you own? Do not deduct secured

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

Yes. Describe.....

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 11 of 60 Debtor 1 Case number (if known) Ryan Thomas Stern \$275.00 Flat screen television, IPod, Cell Phone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

□ No Yes. Describe..... \$300.00 Shotgun 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... \$150.00 All necessary used wearing apparel 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$50.00 Ring 13. Non-farm animals Examples: Dogs, cats, birds, horses □ No Yes. Describe..... \$100.00 Dog (mixed breed) 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,075.00 for Part 3. Write that number here

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

page 2

Page 12 of 60 Case number (if known) Document Debtor 1 **Ryan Thomas Stern** 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition \$25.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... 17.1. Checking Chase Bank \$750.00 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: **Principal Financial Services** for Gregg Appliances, Inc. Safe Harbor IRA \$1,498.91 **Traditional** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them...

Schedule A/B: Property

Official Form 106A/B

Case 16-81934

Doc 1

Filed 08/15/16

Entered 08/15/16 12:27:45

Desc Main

page 3

Page 13 of 60
Case number (if known) Debtor 1 Ryan Thomas Stern 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$2,273.91 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Case 16-81934

Doc 1

Filed 08/15/16

Document

Entered 08/15/16 12:27:45

Desc Main

page 4

Debt	or 1	Case 16-81934 Ryan Thomas Stern	Doc 1	Filed 08/19 Documer		Entered 08 Page 14 of	8/15/16 12:27:45 60 Case number (if known)	Desc Main	
							Case Humber (II known)		
	-	own or have any legal or equi	itable interest i	n any business-re	lated p	roperty?			
		to Part 6.							
П,	Yes. G	So to line 38.							
Part 6		scribe Any Farm- and Commo ou own or have an interest in fa			ou Ow	n or Have an Interes	st In.		
46. D	o you	own or have any legal or	r equitable in	terest in any far	m- or o	commercial fishir	ng-related property?		
1	No.	Go to Part 7.							
[□ Yes	Go to line 47.							
Part 7	7:	Describe All Property You	Own or Have a	n Interest in That '	You Dic	Not List Above			
<i>E</i>	Examp No	have other property of a ples: Season tickets, country	y club membe		ist?				
54.	Add t	he dollar value of all of yo	our entries fro	om Part 7. Write	that n	umber here			\$0.00
Part 8	3:	List the Totals of Each Part	of this Form						
55.	Part 1	: Total real estate, line 2							\$0.00
		: Total vehicles, line 5				\$0.00			70100
57.	Part 3	: Total personal and hou	sehold items	, line 15		\$1,075.00			
58.	Part 4	: Total financial assets, li	ine 36			\$2,273.91			
59.	Part 5	i: Total business-related	property, line	45		\$0.00			
60.	Part 6	: Total farm- and fishing-	related prope	erty, line 52		\$0.00			
61.	Part 7	: Total other property no	t listed, line 5	4	+	\$0.00			
62.	Total	personal property. Add lir	nes 56 through	n 61	_	\$3,348.91	Copy personal property t	otal\$	3,348.9 ²

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$3,348.91

			III — FAUE 13 01 01	.,
Fill in this inform	mation to identify your	case:		
Debtor 1	Ryan Thomas Ste	ern		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Queen size bed and futon Line from Schedule A/B: 6.1	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line nom Schedule A.B. G. 1			100% of fair market value, up to any applicable statutory limit	
Flat screen television, IPod, Cell Phone	\$275.00		\$275.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Shotgun Line from Schedule A/B: 10.1	\$300.00		\$300.00	735 ILCS 5/12-1001(b)
Ellie Holli Gonedale 772. 1911			100% of fair market value, up to any applicable statutory limit	
All necessary used wearing apparel	\$150.00		\$150.00	735 ILCS 5/12-1001(a)
Zille lielli Goriedale 702. TTT			100% of fair market value, up to any applicable statutory limit	
Ring Line from Schedule A/B: 12.1	\$50.00		\$50.00	735 ILCS 5/12-1001(b)
Ellic Holli Golleddie A.D. 12-1			100% of fair market value, up to any applicable statutory limit	

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 16 of 60
Case number (if known)

De	Kyan momas stem							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	Dog (mixed breed) Line from Schedule A/B: 13.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)			
'	Zino iloni conceduto / v Zi. 1911			100% of fair market value, up to any applicable statutory limit				
	Cash Line from Schedule A/B: 16.1	\$25.00		\$25.00	735 ILCS 5/12-1001(b)			
	Line Holli Schedule A/B. 10.1			100% of fair market value, up to any applicable statutory limit				
	Checking: Chase Bank Line from Schedule A/B: 17.1	\$750.00		\$750.00	735 ILCS 5/12-1001(b)			
	Line from Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit				
	Principal Financial Services for Gregg Appliances, Inc. Safe	\$1,498.91		\$1,498.91	735 ILCS 5/12-1006			
	Harbor IRA Traditional Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit				
3.		Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)						
	□ No							
	П Удс							

Fill in this information to identify your case:						
Debtor 1	Ryan Thomas Ste	ern				
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS						
Case number						
(if known)					Check if this is an	
					amended filing	

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	Document	Page	18 of 6	0	•	
Fill in this information to identify your case:						
Debtor 1 Ryan Thomas Stern						
	ddle Name	Last Name				
Debtor 2 (Spouse if, filing) First Name Mic	ddle Name	Last Name				
(Spouse II, IIIIIIg) First Name Mid	Jule Name	Last Name				
United States Bankruptcy Court for the: NORTH	HERN DISTRICT OF ILLI	INOIS				
Case number						
(if known)					☐ Check	if this is an
					amend	ed filing
Official Form 106E/F						
Schedule E/F: Creditors Who Ha	ave Unsecured (Claims	<u>.</u>			12/15
Be as complete and accurate as possible. Use Part 1 fo				araditara with NON	IDDIODITY eleime Li	
Schedule D: Creditors Who Have Claims Secured by Preft. Attach the Continuation Page to this page. If you hame and case number (if known). Part 1: List All of Your PRIORITY Unsecured	nave no information to repo					
Do any creditors have priority unsecured claims a						
☐ No. Go to Part 2.						
Yes.						
2. List all of your priority unsecured claims. If a credidentify what type of claim it is. If a claim has both price possible, list the claims in alphabetical order accordin Part 1. If more than one creditor holds a particular claim. (For an explanation of each type of claim, see the instance.)	ority and nonpriority amounts og to the creditor's name. If you nim, list the other creditors in	s, list that cla you have mo n Part 3.	aim here and ore than two	d show both priority a	and nonpriority amoun	ts. As much as
2.1 Internal Revenue Service	Last 4 digits of account	nt number		\$3,443.00	\$3,443.00	\$0.00
Priority Creditor's Name	_	-				·
U.S. Department of the Treasury Philadelphia, PA 19255	When was the debt inc	-	Tax Perio		=	
Number Street City State ZIp Code Who incurred the debt? Check one.	As of the date you file,	the claim is	s: Check all	that apply		
_	☐ Contingent					
■ Debtor 1 only	☐ Unliquidated					
☐ Debtor 2 only	☐ Disputed					
Debtor 1 and Debtor 2 only	Type of PRIORITY unse		m:			
\square At least one of the debtors and another	☐ Domestic support obl	ligations				
☐ Check if this claim is for a community debt	Taxes and certain oth	her debts yo	u owe the g	overnment		
Is the claim subject to offset?	☐ Claims for death or po	ersonal inju	ry while you	were intoxicated		
■ No	Other. Specify					
Yes						
Part 2: List All of Your NONPRIORITY Unsec	ured Claims					
3. Do any creditors have nonpriority unsecured clair	ms against you?					
☐ No. You have nothing to report in this part. Submit	t this form to the court with y	our other so	chedules.			
■ Yes.						
 List all of your nonpriority unsecured claims in th unsecured claim, list the creditor separately for each than one creditor holds a particular claim, list the other 	claim. For each claim listed,	identify wha	at type of cla	im it is. Do not list cl	aims already included	in Part 1. If more

Total claim

Part 2.

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 19 of 60
Case number (if know)

21st Century Insurance Nonpriority Creditor's Name	Last 4 digits of account number 0638	\$5,202.28
C/O Credit Collection Services Two Wells Avenue	When was the debt incurred? 2012	
Newton Center, MA 02459 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the claim is. Oneon all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	□ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Subrogation claim	
21st Century Insurance	Last 4 digits of account number 1721	\$3,299.00
Nonpriority Creditor's Name C/O Credit Collection Services	When was the debt incurred? 2012	
Two Wells Avenue Newton Center, MA 02459	Mich was the dest medical.	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other Specify Subrogation claim	
21st Century Insurance Nonpriority Creditor's Name	Last 4 digits of account number 1721	\$2,702.00
C/O Credit Collection Services Two Wells Avenue	When was the debt incurred? 2012	
Newton Center, MA 02459	_	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	_	
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify Subrogation claim	

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 20 of 60
Case number (if know)

Debtor	1 Ryan Thomas Stern		Case number (if know)		
4.4	Acceptance Now Nonpriority Creditor's Name	Last 4 digits of account number	0232	\$552.00	
	5501 Headquarters Drive Rent A Center Plano, TX 75024	When was the debt incurred?	2014		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify Residental	Rental		
			Various		
4.5	Advocate Good Shepherd Hospital	Last 4 digits of account number	accounts	\$689.62	
	Nonpriority Creditor's Name 450 West Highway 22 Barrington, IL 60010	When was the debt incurred?	2011, 2012 and 201		
•	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	_			
	Debtor 1 only	Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	ration agreement or divorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other Specify Medical			
	Advocate Health and Hospitals				
4.6	Corp Nonpriority Creditor's Name	Last 4 digits of account number	4341	\$497.21	
	C/O Harris & Harris Ltd. 111 West Jackson Blvd Chicago, IL 60604-4135	When was the debt incurred?	2011-2012		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	Student loans			
	debt	Obligations arising out of a sepa			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts		
	☐ Yes	Other. Specify Medical			

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 21 of 60 Case number (if know)

Debu	Ryan Inomas Stern		Case number (if know)	
4.7	Advocate Health and Hospitals Corp	Last 4 digits of account number	5120	\$88.32
	Nonpriority Creditor's Name C/O Harris & Harris Ltd. 111 West Jackson Blvd	When was the debt incurred?	2011	
	Chicago, IL 60604-4135 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	ь. Спеск ан тат арріу	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medical		
4.8	Advocate Sherman Hospital	Last 4 digits of account number	2526	\$98.30
	Nonpriority Creditor's Name 1425 N. Randall Road Elgin, IL 60123	When was the debt incurred?	2013	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	Other. Specify Medical ex	penses	
4.9	Algonquin Lake In The Hills FPD Nonpriority Creditor's Name	Last 4 digits of account number	1619	\$154.95
	P.O. Box 457 Wheeling, IL 60090	When was the debt incurred?	2013	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	0 0 1	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	□Yes	Other, Specify Medical		

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 22 of 60

Debtor 1 Ryan Thomas Stern Case number (if know) 4.1 AT&T 6774 \$171.70 Last 4 digits of account number 0 Nonpriority Creditor's Name C/O Southwest Credit When was the debt incurred? 2015 4120 International Pkwy Suite 1100 Carrollton, TX 75007 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Phone service 4.1 Centegra Clinical Labs 0270 \$18.00 Last 4 digits of account number Nonpriority Creditor's Name 13707 W. Jackson St, 2013 When was the debt incurred? Woodstock, IL 60098 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 Centegra Health System 0002 \$1,594.25 2 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 1990 When was the debt incurred? 2013 Woodstock, IL 60098 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 23 of 60

Debtor 1 Ryan Thomas Stern Case number (if know) 4.1 Centegra Physician Care 0029 \$629.00 Last 4 digits of account number 3 Nonpriority Creditor's Name P.O. Box 37847 When was the debt incurred? 2013 Philadelphia, PA 19101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.1 Centegra Primary Care 4255 \$1,025.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 37847 When was the debt incurred? 2012 Philadelphia, PA 19101 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 **Chase Card** 9644 \$443.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 15298 When was the debt incurred? 2008-2013 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Various products and services ☐ Yes

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 24 of 60

Debt	Kyan Inomas Stern		Case number (if know)	
4.1 6	City of Crystal Lake Fire Rescue	Last 4 digits of account number	1354	\$157.88
	Nonpriority Creditor's Name C/O NCInc.	When was the debt incurred?	2014	
	3601 Algonquin Road, Suite 232 Rolling Meadows, IL 60008 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	Type of NONPRIORITY unsecured ☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharing	aration agreement or divorce that you did not	
	Yes	Other. Specify Ambulance	service	
4.1 7	Commonwealth Edison	Last 4 digits of account number	5237	\$421.88
	Nonpriority Creditor's Name C/O Credit Protection Association P.O. Box 802068	When was the debt incurred?	2015	
	Dallas, TX 75380 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Utility		
4.1 8	Dr. David Janes DDS Nonpriority Creditor's Name	Last 4 digits of account number	1159	\$483.00
	210 N. Madison St. Woodstock, IL 60098	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other, Specify Dental		

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 25 of 60
Case number (if know)

Debtor	1 Ryan Thomas Stern		Case number (if know)	
4.1	Geico Casualty Company	Last 4 digits of account number	8652	\$25.68
	Nonpriority Creditor's Name C/O Credit Collection Services Two Wells Avenue	When was the debt incurred?	2013	
	Newton Center, MA 02459	_		
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Insurance	oremium	
4.2	Greater Elgin Family Care Center	Last 4 digits of account number	7925	\$119.80
	Nonpriority Creditor's Name 860 Summit St. Elgin, IL 60120	When was the debt incurred?	2013	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical		
4.2	Greater Elgin Family Care Center	Last 4 digits of account number	7925	\$115.00
	Nonpriority Creditor's Name 370 Summit Street	When was the debt incurred?	2013	
	Rumber Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam's	S. Olleck all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical		

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 26 of 60

ase number (if know) Debtor 1 Ryan Thomas Stern McHenry 4.2 Harris & Harris Ltd \$1,700.67 2 Last 4 digits of account number County Nonpriority Creditor's Name 111 West Jackson Blvd. When was the debt incurred? 2010-2012 Suite 400 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Fines Other. Specify 4.2 1032 \$443.75 J.P. Morgan Chase Last 4 digits of account number 3 Nonpriority Creditor's Name C/O Firstsource Advantage LLC When was the debt incurred? 2013-2015 P.O. Box 628 Buffalo, NY 14240 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Various products and services Other. Specify 4.2 Lake McHenry Pathology Assoc. 9582 \$74.00 Last 4 digits of account number Nonpriority Creditor's Name 520 E. 22nd St. When was the debt incurred? 2013 Lombard, IL 60148 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify

Entered 08/15/16 12:27:45 Case 16-81934 Doc 1 Filed 08/15/16 Desc Main Document

Page 27 of 60 Case number (if know) Debtor 1 Ryan Thomas Stern 4.2 **McHenry County Circuit Clerk** 8453 \$715.02 Last 4 digits of account number 5 Nonpriority Creditor's Name C/O Harris & Harris When was the debt incurred? 2013 111 West Jackson Blvd. Suite 600 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Violations 4.2 **McHenry County Clerk** V757 \$302.90 Last 4 digits of account number 6 Nonpriority Creditor's Name C/O Alliance One 2010 When was the debt incurred? 8589 Aero Drive San Diego, CA 92123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Violation ☐ Yes 4.2 **McHenry County Clerk** 7857 \$169.00 Last 4 digits of account number Nonpriority Creditor's Name C/O Alliance One When was the debt incurred? 2011 6565 Kimball Drive, Suite 200 Gig Harbor, WA 98335 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Violation ☐ Yes

Official Form 106 E/F

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 28 of 60

Case number (if know) Debtor 1 Ryan Thomas Stern 4.2 \$860.60 **McHenry County Clerk** 0077 Last 4 digits of account number 8 Nonpriority Creditor's Name C/O Alliance One When was the debt incurred? 2010-2011 8589 Aero Drive San Diego, CA 92123 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Violations 4.2 **McHenry County Clerk** 0986 \$726.93 Last 4 digits of account number 9 Nonpriority Creditor's Name C/O Harris & Harris 2011-2012 When was the debt incurred? 111 West Jackson Suite 600 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Violations ☐ Yes 4.3 **McHenry County Clerk** 0986 \$693.56 Last 4 digits of account number 0 Nonpriority Creditor's Name C/O Harris & Harris When was the debt incurred? 2011-2012 111 W. Jackson Blvd. Suite 600 Chicago, IL 60604 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Violations ☐ Yes

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 29 of 60

Debtor 1 Ryan Thomas Stern Case number (if know) 4.3 **McHenry County Clerk** 4570 \$251.87 Last 4 digits of account number Nonpriority Creditor's Name C/O Harris & Harris When was the debt incurred? 2010 111 West Jackson Suite 600 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Violation 4.3 **McHenry County Clerk** 1112 \$169.23 Last 4 digits of account number 2 Nonpriority Creditor's Name C/O Harris & Harris 2011 When was the debt incurred? 111 West Jackson Suite 600 Chicago, IL 60604 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Violation ☐ Yes 4.3 **Northwest Collectors** 6056 \$154.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 3601 Algonquin Road Suite 23 When was the debt incurred? 2010 Rolling Meadows, IL 60008 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 30 of 60

Case number (if know) Debtor 1 Ryan Thomas Stern 4.3 **Oakwood Hills Police Department** 1893 \$50.00 Last 4 digits of account number 4 Nonpriority Creditor's Name C/O Armor Systems Corp When was the debt incurred? 2015 1700 Kiefer Drive, Suite 1 Zion, IL 60099 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Ticket 4.3 **Sherman Hosptial** 2526 \$98.30 Last 4 digits of account number 5 Nonpriority Creditor's Name C/O MiraMed Revenue Group LLC 2013 When was the debt incurred? Dept. 77304 - P.O. Box 7700 Detroit. MI 48277 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical ☐ Yes 4.3 T-Mobile 2106 \$298.19 Last 4 digits of account number 6 Nonpriority Creditor's Name C/O Southwest Credit Systems When was the debt incurred? 2015 4120 International Pkwy Suite 1100 Carrollton, TX 75007 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Cell phone ☐ Yes

Official Form 106 E/F

Entered 08/15/16 12:27:45 Case 16-81934 Doc 1 Filed 08/15/16 Desc Main Document Page 31_of 60

Case number (if know) Debtor 1 Ryan Thomas Stern 4.3 Tri County Emergency Physicians **Various** \$1,118.60 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 98 When was the debt incurred? 2011, 2012 and 2013 Barrington, IL 60011 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical 4.3 **URO Partners** 5110 \$71.22 Last 4 digits of account number 8 Nonpriority Creditor's Name 3183 Paysphere Circle When was the debt incurred? 2014 Chicago, IL 60674 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.3 Village Fox River Grove 7080 \$100.00 9 Last 4 digits of account number Nonpriority Creditor's Name **Photo Enforcement Program** When was the debt incurred? 2011 75 Remittance Drive Suite 6658 Chicago, IL 60675 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Red Light Violation

☐ Yes

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 32 of 60 Case number (if know)

Debtor 1 Ryan Thomas Stern 4.4 Village of Fox River Grove 1491 \$200.00 Last 4 digits of account number 0 Nonpriority Creditor's Name C/O Bonded Collection Corporation 2011 When was the debt incurred? 29 East Madison St. Suite 1650 Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Ticket 4.4 Wellington Radiology Group, S.C 5201 \$47.00 Last 4 digits of account number Nonpriority Creditor's Name 39006 Treasury Ctr When was the debt incurred? 2012 Chicago, IL 60694 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Medical Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? 21st Century Insurance Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 55156 Part 2: Creditors with Nonpriority Unsecured Claims Boston, MA 02205 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Geico Casualty Company** Line 4.19 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 55126 Part 2: Creditors with Nonpriority Unsecured Claims Boston, MA 02205 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Credit Management Line 4.36 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 8875 Aero Drive Part 2: Creditors with Nonpriority Unsecured Claims Suite 200 San Diego, CA 92123 Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

Entered 08/15/16 12:27:45 Case 16-81934 Doc 1 Filed 08/15/16 Desc Main Page 33 of 60 Case number (if know) Document

Debtor 1 Ryan Thomas Stern

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	3,443.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	3,443.00
				Т	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	26,732.71
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	26,732.71

		DOCUME	<u>ni Pade 34 di bu</u>	
Fill in this inform	mation to identify your	case:		
Debtor 1	Ryan Thomas Ste	ern		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the o	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
0	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
	,		0.0.0	0000	

		Docume	nt Page 35 d)T (h()	
Fill in this i	nformation to identify your				
Debtor 1	Ryan Thomas Ste	ern			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name		
	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)	er				☐ Check if this is an
					amended filing
Official	Form 106H				
	ıle H: Your Cod	obtore			40/45
Scriedi	ale n. Tour Cou	enroi 2			12/15
your name a	and case number (if known) ou have any codebtors? (If	. Answer every question			f any Additional Pages, write
■ No □ Yes					
Arizona _	in the last 8 years, have you , California, Idaho, Louisiana,				tates and territories include
	Go to line 3. Did your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown creditor on Schedule D (Official chedule E/F, or Schedule G to fill
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	IP Code		Column 2: The credi	tor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	ame			☐ Schedule E/F, line	
				☐ Schedule G, line	
	umber Street				
Ci	ity	State	ZIP Code		
3.2				☐ Schedule D, line	
	ame			□ Schedule E/F, line	
				☐ Schedule G, line	
N	umber Street			_	
C	ity	State	ZIP Code		

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 36 of 60

Eill	in this information to ident	ify your ca	ace.								
		n Thoma									
	otor 2										
Uni	ted States Bankruptcy Co	urt for the	: NORTHERN DISTRIC	CT OF ILLINOIS							
	se number lown)			-			□ A		ed filing ent showin	g postpetition ollowing date:	
0	fficial Form 106	<u> </u>					N	/M / DD/ \	/YYY		
S	chedule I: You	ır Ince	ome								12/15
spo atta	plying correct information use. If you are separate characters to the task of	l and you nis form. (loyment	r spouse is not filing w	ith you, do not inclu	ude infor	mati	on abou	t your spo umber (if	ouse. If mo known). A	ore space is Answer every	needed,
	information.							Debtor 2 or non-filing spouse ☐ Employed			
	If you have more than one job, attach a separate page with information about additional		Employment status	■ Employed□ Not employed				☐ Not employed			
	employers.		Occupation	Line Cook							
	Include part-time, seaso self-employed work.	nal, or	Employer's name	The Tracks							
	Occupation may include or homemaker, if it appli		Employer's address	Cary, IL 60013							
			How long employed t	here? 2 week	ĸs			_			
Par	t 2: Give Details A	bout Mor	thly Income								
	mate monthly income as use unless you are separa		ate you file this form. If	you have nothing to	report for	any	line, write	e \$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse e space, attach a separate			ombine the information	on for all	empl	oyers for	that perso	on on the li	nes below. If	you need
							For Del	btor 1		btor 2 or ing spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	1	,228.18	\$	N/A	
3.	Estimate and list mont	hly overti	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Incom	e. Add lir	ne 2 + line 3.		4.	\$	1,2	28.18	\$	N/A	

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 37 of 60

Deb	tor 1	Ryan Thomas Stern	-	C	Case i	number (if ki	nown)				
					For	Debtor 1			or Debtor on-filing s		
	Cop	by line 4 here	4.		\$	1,228	3.18	\$		N/A	<u>\</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	ā.	\$	144	1.00	\$		N/A	\
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50) .	\$		0.00	\$		N/A	-
	5d.	Required repayments of retirement fund loans	5d	d.	\$		0.00	\$		N/A	<u></u>
	5e.	Insurance	5e	€.	\$		0.00	\$		N/A	\
	5f.	Domestic support obligations	5f.		\$		0.00	. \$_		N/A	_
	5g.	Union dues	5 g		\$		0.00	. \$_		N/A	
	5h.	Other deductions. Specify:	_ 5h	1.+	\$		0.00	+ \$_		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	144	4.00	. \$_		N/A	<u>\</u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,084	1.18	. \$_		N/A	<u>\</u>
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	90		\$			¢		NI/A	
	8b.	Interest and dividends	8a 8b		^Ф _		0.00 0.00	. \$_ \$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive).	Φ	'	J.UU	Ψ_		N/A	<u>\</u>
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80) .	\$		0.00	\$_		N/A	<u>\</u>
	8d.	Unemployment compensation	80	d.	\$		0.00	\$		N/A	\
	8e.	Social Security	8e	€.	\$	(0.00	\$_		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$		0.00	\$_		N/A	<u>1</u>
	8g.	Pension or retirement income	89		\$		0.00	. \$_		N/A	
	8h.	Other monthly income. Specify:	8h	1.+	\$		0.00	+ \$_		N/A	<u>\</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	(0.00	\$_		N/	Ά
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,084.18	+ \$		N/A	= \$	1,084.18
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		1,004.10			14/5		1,004.10
11.	Star Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	depe		-	•		•	Schedule	e J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The rester that amount on the Summary of Schedules and Statistical Summary of Certain lies							e. 12.	\$	1,084.18
13.	Do	you expect an increase or decrease within the year after you file this form	?							Comb	ined Ily income
-		No.									

Official Form 106I Schedule I: Your Income page 2

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 38 of 60

T=811	in this informs	tion to identify w	0.12.00001			1		
		ation to identify ye						
Deb	otor 1	Ryan Thoma	as Stern			Che	eck if this is: An amended filing	
	otor 2						A supplement show	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ted States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
	se number nown)							
Of	fficial Fo	orm 106J				-		
So	chedule	J: Your	Exper	ises				12/1
info	ormation. If m		eded, atta	. If two married people ar ich another sheet to this n.				
Par 1.	t 1: Desci	ribe Your House	ehold					
	■ No. Go to	o line 2.	in a separ	ate household?				
	□N	lo		al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	•	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.						☐ Yes
								□ No □ Yes
							<u> </u>	□ res
								☐ Yes
								□ No
2	De veur ev	aanaaa inaliida	_					☐ Yes
3.	expenses o	penses include f people other t d your depende	han _—	No Yes				
Est exp	imate your ex	a date after the	our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed are using the following the fol	orm as a s e <i>J</i> , check	supplement in a Cha the box at the top c	apter 13 case to report of the form and fill in the
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i>)			Your exp	enses
4.		or home owners and any rent for th		ses for your residence. I	nclude first mortgag	e 4.	\$	0.00
	If not includ	ded in line 4:						
	4a. Real e	estate taxes				4a.	\$	0.00
		erty, homeowner'	s, or renter	's insurance		4b.	·	0.00
				upkeep expenses		4c.	:	0.00
_		owner's associa			and a model of	4d.		0.00
5.	Additional i	mortgage paym	ents for yo	our residence, such as ho	me equity loans	5.	D	0.00

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 39 of 60

6	Debto	or 1	Ryan Thomas Stern Ca	ase num	nber (if known)	
6a	6. I	Utilit	ies:			
6	-			6a.	\$	0.00
6c. Telephone, cell phone, internet, satellite, and cable services 6c. \$ 0.00	6	6b.	Water, sewer, garbage collection	6b.	\$	0.00
6d. Cher. Specify: Cher. Specify: 200. and housekeeping supplies 200. and housekeeping supplies 200. and housekeeping supplies 200. and housekeeping supplies 200. and	6	6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	150.00
7. Food and housekeeping supplies 7. \$ 200.0 8. Childcare and children's education costs 8. \$ 0.0 9. Clothing, laundry, and dry cleaning 9. \$ 100.0 10. Personal care products and services 10. \$ 50.0 11. Medical and dental expenses 11. \$ 75.0 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$ 250.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 35.0 14. Charitable contributions and religious donations 14. \$ 0.0 15. Insurance. 0.0 15a. Life insurance 15a. \$ 0.0 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15b. \$ 0.0 15b. Health insurance 15b. \$ 0.0 15c. Vehicle insurance 15b. \$ 0.0 15c. Vehicle insurance. Specity. 15d. \$ 0.0 15c. Vehicle insurance. 15b. \$ 0.0 15c. Vehicle insurance. 15b. \$ 0.0 15c. Vehicle insurance. 15b. \$ 0.0 15c. Vehicle insurance 15b. \$	6	6d.	Other. Specify:	6d.	\$	0.00
8. Childcare and children's education costs 8. \$ 0.0 9. Clothing, laundry, and dry cleaning 9. \$ 100.0 11. Medical and dental expenses 11. \$ 75.0 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$ 250.0 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 35.0 14. Charitable contributions and religious donations 14. \$ 0.0 15. Insurance. 0.0 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15b. \$ 0.0 15a. Life insurance 15c. Vehicle insurance. 15c. \$ 0.0 15b. Health insurance 15c. Vehicle insurance. 15c. \$ 0.0 15c. Vehicle insurance. Specify: 15d. Other insurance. 15c. \$ 0.0 15c. Vehicle insurance. Specify: 16. \$ 0.0 15d. Other insurance. Specify: 16. \$ 0.0 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. \$ 0.0 17a. Car payments for Vehicle 1 17a. \$ 0.0 17b. Car payments for Vehicle 2 17a. \$ 0.0	7.	Food	· •	- 7.	\$	200.00
Clothing, laundry, and dry cleaning	8. (Child	dcare and children's education costs	8.	\$	0.00
10. Nersonal care products and services	9. (Cloth	ning, laundry, and dry cleaning	9.	\$	100.00
1.1. Medical and dental expenses 11. \$ 75.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. 12. \$ 250.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 35.00 14. Charliable contributions and religious donations 14. \$ 0.00 15. Insurance. 150.00 150.00 15b. Health insurance 15b. \$ 0.0 15b. Health insurance. 15b. \$ 0.0 15c. Vehicle insurance. Specify: 15c. \$ 0.0 15c. Vehicle insurance. Specify: 17c. \$ 0.0 <t< td=""><td>10. I</td><td>Pers</td><td>onal care products and services</td><td>10.</td><td>\$</td><td>50.00</td></t<>	10. I	Pers	onal care products and services	10.	\$	50.00
Transportation. Include gas, maintenance, bus or train fare.	11. I	Medi	cal and dental expenses	11.	\$	75.00
Do not include car payments. 12. \$ 250.0	12. -	Tran	sportation. Include gas, maintenance, bus or train fare.			
14. Charitable contributions and religious donations 14. \$ 0.0				12.	\$	250.00
15.	13. I	Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13.	\$	35.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. 5a. 25.0 15b. Health insurance 15b. 5a. 25.0 15c. Vehicle insurance. Specify: 15c. 5b. 5a. 0.0 15d. Other insurance. Specify: 15d. 5b. 5a. 0.0 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. 9a. 0.0 17b. Specify: 17c. 2ar payments for Vehicle 1 17a. 9a. 0.0 17b. Car payments for Vehicle 2 17b. 9a. 0.0 17c. Other. Specify: 17c. 9a. 0.0 17d. Other. Specify: 17d. 0.0 17d. Other. Specify: 17d. 0.0 17d. Other. Specify: 17d. 0.0 18ducted from your pay on line 5, Schedule 1, Your Income (Official Form 1061). 18. 9a. 19	14. (Char	itable contributions and religious donations	14.	\$	0.00
15a						
15b. Health insurance						
15c. Vehicle insurance. Specify: 15d. S 0.00						0.00
15d. Other insurance. Specify: 15d. \$ 0.0						25.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Specify: 17a. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Specify: 18. Specify: 19. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 106i). 19. Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Calculate your monthly net income.	•	15c.	Vehicle insurance		·	0.00
Specify:				_ 15d.	\$	0.00
17a. Car payments for Vehicle 1 17a. \$ 0.0 17b. Car payments for Vehicle 2 17b. \$ 0.0 17c. Other. Specify: 17c. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20e. Homeowner's association or condominium dues 20e. \$ 0.0 21. Other: Specify: 21. +\$ 0.0 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$ 885.00 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1					_	
17a. Car payments for Vehicle 1 17a. \$ 0.0 17b. Car payments for Vehicle 2 17b. \$ 0.0 17c. Other. Specify: 17c. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. Specify: 19. 18. \$ 0.0 20. Mortgages on other property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20d. Homeowner's association or condominium dues 20e. \$ 0.0 21. Other: Specify: 21. +\$ 0.0 22. Calculate your monthly expenses \$ 885.00 23. Calculate your monthly net income. \$ 885.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a.			,	_ 16.	\$	0.00
17b. Car payments for Vehicle 2 17b. \$ 0.0 17c. Other. Specify: 17c. \$ 0.0 17d. Other. Specify: 17d. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. \$ 0.0 19. Other payments you make to support others who do not live with you. \$ 0.0 Specify: 19. 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20a. Mortgages on other property 20a. \$ 0.0 0.0 20b. Real estate taxes 20b. \$ 0.0 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20e. Homeowner's association or condominium dues 20e. \$ 0.0 21. Other: Specify: 21. +\$ 0.0 22c. Add lines 4 through 21. \$ 885.00 22c. Add line 22a and 22b. The result is your monthly expenses. \$ 885.00 23a. Calculate your monthly net income. 23a. \$ 1,0				47-	•	0.00
17c. Other. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 17d. Specify: 18deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. Specify: 19. Other payments you make to support others who do not live with you. Specify: 19. Specify: 19. Specify: 19. Specify: 20a. Mortgages on other property 20a. Mortgages on other property 20a. Specify: 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. Specify: 21d. Specify: 22d. Calculate your monthly expenses 22a. Add lines 24 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Specify in 17d. Specify: 25d. Specify: 27d. Specify: 28d. Specify: 29d. Specify: 29					·	-
17d. Other. Specify: 17d. \$ 0.0 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20e. Homeowner's association or condominium dues 20e. \$ 0.0 21. Other: Specify: 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1						0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. S 20d. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1				_	· -	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1				_ 17d.	\$	0.00
19. Other payments you make to support others who do not live with you. Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20f. Other: Specify: 21. +\$ 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1				18	\$	0.00
Specify: 19. 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.0 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20e. Homeowner's association or condominium dues 20e. \$ 0.0 21. Other: Specify: 21. +\$ 0.0 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$ 885.00 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1				10.		
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.0 20b. Real estate taxes 20b. \$ 0.0 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses 20d. \$ 0.0 20d. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: 21. +\$ 0.0 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1				10	Ψ	0.00
20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$ 20d. \$ 20d		•	•	_	our Income	
20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 20e. Homeowner's association or condominium dues 20e. \$ 20e. \$ 21. +\$ 22e. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 3. 1,084.1						0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$ 0.0 21. Other: Specify: 21. +\$ 0.0 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1						0.00
20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 21. Other: Specify: 21. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1						-
20e. Homeowner's association or condominium dues 20e. \$ 0.0 21. Other: Specify: 21. +\$ 0.0 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1						-
21. Other: Specify: 22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1						
22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1					·	
22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1	Z1. (Othe	n. Specily.	_ 21.		0.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$ 885.00 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1	22. (Calc	ulate your monthly expenses			
22c. Add line 22a and 22b. The result is your monthly expenses. \$ 885.00 23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1	2	22a.	Add lines 4 through 21.		\$	885.00
23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1	2	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
23. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1	:	22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	885.00
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,084.1					· —	
			· · · · · · · · · · · · · · · · · · ·		_	
23b. Copy your monthly expenses from line 22c above. 23b\$						·
	2	23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	885.00
20. O have a second this consequent the second second the second		00	Out the state of the same of t			
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . 23c. \$ 199.1	2	23c.		23c	s	199.18
The result is your <i>monthly net income</i> .			The result is your <i>monthly net income</i> .	200.	L *	
24. Do you expect an increase or decrease in your expenses within the year after you file this form?	24 1	Do v	ou expect an increase or decrease in your expenses within the year after you t	ile this	s form?	
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because						ase or decrease because of a
modification to the terms of your mortgage?				5 0		
■ No.	!	■ N	0.			
☐ Yes. Explain here:						

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 40 of 60

Fill in this infor	mation to identify your	case:			
Debtor 1	Ryan Thomas Ste	ern			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	Γ OF ILLINOIS		
Case number					
(if known)				☐ Check if this is an	
				amended filing	
Official For	m 106Dec				
				2.1.1.1	
Declarat	tion About a	ın Individual	Debtor's S	Schedules	12/15
obtaining mone years, or both. 1		n connection with a ban		ules. Making a false statement, concealing property, ult in fines up to \$250,000, or imprisonment for up to	
Did you pa	y or agree to pay some	eone who is NOT an atto	rney to help you fill ou	ut bankruptcy forms?	
■ No					
□ Yes.	Name of person			Attach Bankruptcy Petition Preparer's No.	
				Declaration, and Signature (Official Form	tice.
	alty of perjury, I declare e true and correct.	that I have read the sum	nmary and schedules	filed with this declaration and	
that they ar		that I have read the sum	nmary and schedules	filed with this declaration and	

Date _____

Date August 15, 2016

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 41 of 60

		nation to identify yo						
De	btor 1	Ryan Thomas First Name	Stern Middle Name	Last Name				
De	btor 2							
(Spo	ouse if, filing)	First Name	Middle Name	Last Name				
Un	ited States Bar	nkruptcy Court for the	e: NORTHERN DISTRICT	OF ILLINOIS				
Ca	se number							
(if kı	nown)						_	eck if this is an
							am	ended filing
\sim	::::::	407						
	ficial Fo	_	. A ((= ! (= ! ! ! !		(D	\ I		
			Affairs for Indiv					4/1
			ssible. If two married people d, attach a separate sheet to					
		n). Answer every qu				,	,	
Pa	rt 1: Give D	etails About Your N	Marital Status and Where Yo	ou Lived Before				
1.	What is your	r current marital sta	itus?					
	☐ Massisad							
	✓ Married✓ Not mar	ried						
•			Providence and an other description		0			
2.	During the la	ast 3 years, nave yo	ou lived anywhere other that	n where you live nov	N°?			
	□ No							
	Yes. Lis	t all of the places you	u lived in the last 3 years. Do	not include where yo	u live nov	<i>l</i> .		
	Debtor 1 Pr	ior Address:	Dates Debtor	1 Debtor 2	Prior Ac	ldress:		Dates Debtor 2
	6600 Hawt	thorne Drive	lived there From-To:	☐ Same a	na Dabtar	1		lived there ☐ Same as Debtor 1
	Cary, IL 60			□ Same	as Debioi	ı		From-To:
	1887 Some	erset Drive	From-To:	☐ Same a	as Debtor	1		☐ Same as Debtor 1
	Glendale H	Heights, IL 60139						From-To:
3.	Within the la	est 8 years, did you	ever live with a spouse or le	egal equivalent in a	commur	uity property state or ter	ritory?	(Community property
			California, Idaho, Louisiana, N					
	■ No							
	_	ake sure you fill out S	Schedule H: Your Codebtors (Official Form 106H).				
5-	-1 0 - Family							
Pa	Explai	n the Sources of Yo	our income					
4.			employment or from operat				calend	lar years?
			you received from all jobs and ou have income that you rece					
	П							
		in the details.						
	_ 100.1111	are detaile.	D 1.			D 14		
			Debtor 1	Cuas incarr		Debtor 2		Cross income
			Sources of income Check all that apply.	Gross income (before deduction	ns and	Sources of income Check all that apply.		Gross income (before deductions
				exclusions)				and exclusions)

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Case 16-81934 Page 42 of 60
Case number (if known)

Document Debtor 1 Ryan Thomas Stern

					Debtor 1			Debtor 2			
					Sources of income Check all that apply.		s income re deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
			1 of currei iled for bar	nt year until kruptcy:	■ Wages, commissions, bonuses, tips		\$7,369.07	☐ Wages, combonuses, tips	missions,		
					☐ Operating a business			☐ Operating a	business		
			dar year: December	31, 2015)	■ Wages, commissions, bonuses, tips		\$38,767.00	☐ Wages, combonuses, tips	missions,		
					☐ Operating a business			☐ Operating a	business		
			dar year be December		■ Wages, commissions, bonuses, tips		\$36,131.00	☐ Wages, combonuses, tips	missions,		
					☐ Operating a business			☐ Operating a	business		
	and o winni	other plants of the second sec	oublic benet f you are fili	it payments; ng a joint cas he gross inco	er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separat	rest; divic you recei	lends; money colled ved together, list it d	eted from lawsuits; only once under De	royalties; and ebtor 1.	ecurity, unemployment, d gambling and lottery	
					Debtor 1			Debtor 2			
					Sources of income Describe below.	each	s income from source re deductions and sions)	Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pai	rt 3:	List	Certain Pa	yments You	Made Before You Filed for I		,				
6.	_	either No.	Neither Deindividual puring the No.	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre not include	s debts primarily consumer ebtor 2 has primarily consupersonal, family, or household re you filed for bankruptcy, disach creditor to whom you paileditor. Do not include payment payments to an attorney for the on 4/01/19 and every 3 years	umer det Id purpos d you pa id a total nts for do his bankr	se." y any creditor a tota of \$6,425* or more mestic support obliq uptcy case.	ul of \$6,425* or mo in one or more pay gations, such as ch	re? /ments and th illd support a	ne total amount you nd alimony. Also, do	
	•	Yes.			r both have primarily consure you filed for bankruptcy, di			al of \$600 or more?	,		
			No.	Go to line 7							
			□ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.						
	Cree	ditor'	s Name and	l Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	payment for	

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 43 of 60 Case number (if known)

7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1	ortners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which you g securities; and an	u are a genera ly managing a	al partner; corporations agent, including one for		
	alimony.							
	■ No							
	Yes. List all payments to an insider.	Dates of navement	Tatal amazunt	A	Dannan fan	this manners		
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment		
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	any property on ac	count of a d	ebt that benefited an		
	_							
	No							
	☐ Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment ditor's name		
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures						
9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or cus modifications, and contract disputes.								
	NoYes. Fill in the details.							
	Case title	Nature of the case	Court or agency		Status of th	ne case		
	Case number							
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below		erty repossessed, f	oreclosed, garnis	hed, attached	d, seized, or levied?		
	No. Go to line 11.Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date		Value of the		
		Explain what happened	i			property		
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?							
	No							
	Yes. Fill in the details.	Describe the estion the		Dete		A		
	Creditor Name and Address	Describe the action the	creditor took	taken	action was	Amount		
12.	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? 							
	■ No □ Yes							
Pai	rt 5: List Certain Gifts and Contributions							
	Within 2 years before you filed for bankrup	tcy, did you give any gifts	s with a total value	of more than \$600) per person	?		
	■ No			•	•			
	☐ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates the gi	you gave fts	Value		
	Person to Whom You Gave the Gift and Address:							

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 44 of 60 Case number (if known)

14.	 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. 								
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.	total	Describe what you contributed		Dates you contributed	Value			
Pai	rt 6: List Certain Losses								
15.	Within 1 year before you filed for bankr or gambling? No Yes. Fill in the details.	uptcy o	r since you filed for bankruptcy, did y	ou lose anyt	thing because of the	it, fire, other disaster			
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the lo le the amount that insurance has paid. Li nnce claims on line 33 of <i>Schedule A/B: I</i>	ist pending	Date of your loss	Value of property lost			
Pai	rt 7: List Certain Payments or Transfe	rs							
16.	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition □ No ■ Yes. Fill in the details.	prepar	ing a bankruptcy petition? ers, or credit counseling agencies for serv	vices required	d in your bankruptcy.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment			
	Michael T. Barrett, Sr. 530 Rockland Road Crystal Lake, IL 60014		Attorney Fees- \$949.00 Court Filing Fees - \$335.00 Credit Report - \$25.00		7/5/2016	\$1,309.00			
	Abacus Credit Counseling		Credit Counseling Class		June 19, 2016	\$25.00			
17.	Within 1 year before you filed for bankr promised to help you deal with your cre Do not include any payment or transfer that No Yes. Fill in the details.	editors	or to make payments to your creditors		or transfer any prope	rty to anyone who			
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment			
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No Yes. Fill in the details.	ur busi rs made	ness or financial affairs? as security (such as the granting of a se						
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made			
	Person's relationship to you				_				

Entered 08/15/16 12:27:45 Desc Main Case 16-81934 Doc 1 Filed 08/15/16 Page 45 of 60 Case number (if known) Document

Debtor 1 **Ryan Thomas Stern**

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust	Description and v	alue of the propert	y transferred	Date Transfer was made				
	1 int of Contain Financial Accounts Instant		David Ctares	ua Illuita	made				
Pai	t 8: List of Certain Financial Accounts, Instr	ruments, Sare Deposit	Boxes, and Storag	ge Units					
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accour	nts; certificates of o						
	Yes. Fill in the details.								
	Address (Number, Street, City, State and ZIP account number instrument closed, so moved, or		Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		scribe the contents	Do you still have it?				
22.	Have you stored property in a storage unit or	place other than your	home within 1 yea	r before you filed for bankrupt	cy?				
	No								
	Yes. Fill in the details.								
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		scribe the contents	Do you still have it?				
Par	t 9: Identify Property You Hold or Control fo	or Someone Else							
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ide any property yo	ou borrowed from, are storing	for, or hold in trust				
	■ No □ Yes. Fill in the details.								
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		scribe the property	Value				
Par	t 10: Give Details About Environmental Inform	mation							
For	the purpose of Part 10, the following definition	s apply:							
	Environmental law means any federal, state, of toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	water, groundwat						
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa		environmental law,	whether you now own, operate	e, or utilize it or used				

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

hazardous material, pollutant, contaminant, or similar term.

Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Case 16-81934 Page 46 of 60 Case number (if known) Document

Debtor 1 **Ryan Thomas Stern**

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	■ No									
		II in the details.								
	Name of si Address (N	te umber, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
25.	Have you no	otified any governmental unit of	any release of hazardous material?							
	■ No □ Yes. Fi	II in the details.								
	Name of si Address (N	te umber, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
26.										
	■ No □ Yes. Fill in the details.									
	Case Title Case Numb	per	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case				
Par	t 11: Give I	Details About Your Business or	Connections to Any Business							
27.	. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?									
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time									
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)									
	☐ A partner in a partnership									
	☐ An o	officer, director, or managing ex	ecutive of a corporation							
	☐ An o	owner of at least 5% of the votin	g or equity securities of a corporation							
	■ No. No	ne of the above applies. Go to F	Part 12.							
	☐ Yes. CI	neck all that apply above and fill	in the details below for each business	s.						
	Business N Address	lame	Describe the nature of the business		Employer Identification number Do not include Social Security r					
		et, City, State and ZIP Code)	Name of accountant or bookkeeper		Dates business existed	idiliber of Trine.				
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.									
	■ No □ Yes. Fi	II in the details below.								
	Name Address	et, City, State and ZIP Code)	Date Issued							
	(Mulliber, Street	st, ony, state and Air Code)								

Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Case 16-81934 Doc 1 Page 47 of 60 Case number (if known) Document

Debtor 1 Ryan Thomas Stern

Part 12: Sign Below	
are true and correct. I understand that ma	of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers ng a false statement, concealing property, or obtaining money or property by fraud in connection up to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Ryan Thomas Stern	
Ryan Thomas Stern	Signature of Debtor 2
Signature of Debtor 1	

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Date

■ No ☐ Yes

Date August 15, 2016

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 48 of 60

			•	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Ryan Thomas Ste			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Spouse II, IIIIIIg)	riist Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
0				
Case number (if known)				☐ Check if this is an amended filing
If you are an inc		pter 7, you must fill out t	uals Filing Under	r Chapter 7 12/15
You must file th	is form with the court w ever is earlier, unless th		ile your bankruptcy petition or	by the date set for the meeting of creditors, and copies to the creditors and lessors you list
	eople are filing togethe	r in a joint case, both are	equally responsible for suppl	lying correct information. Both debtors must
•	and accurate as possib	•	led, attach a separate sheet to	this form. On the top of any additional pages

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	<u>_</u>
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 49 of 60

Debtor 1	Ryan Thomas Stern	Case number (if kn	own)
name: Descrip propert securir		 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
n the info	ormation below. Do not list real estate le	Leases ou listed in Schedule G: Executory Contracts and Unex ases. Unexpired leases are leases that are still in effect lease if the trustee does not assume it. 11 U.S.C. § 365	; the lease period has not yet ended.
Describe	your unexpired personal property lease	es .	Will the lease be assumed?
Lessor's r Description Property:	on of leased		□ No
Lessor's r Description Property:	on of leased		□ No □ Yes
Lessor's r Description Property:	on of leased		□ No □ Yes
Lessor's r Description Property:	on of leased		□ No
Lessor's r Description Property:	on of leased		□ No
Lessor's r Description Property:	on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Part 3: Jnder per	Sign Below nalty of perjury, I declare that I have indicate in the control of th	icated my intention about any property of my estate tha	
X /s/ F Rya	Ryan Thomas Stern In Thomas Stern ature of Debtor 1	XSignature of Debtor 2	
Date	e August 15. 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 54 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Ryan Thomas Stern		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTOI	RNEY FOR D	EBTOR(S)	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the compensation paid to me within one year before the filing of the petition in bank be rendered on behalf of the debtor(s) in contemplation of or in connection with			or agreed to be pai	d to me, for services	
	For legal services, I have agreed to accept		\$	949.00	
	Prior to the filing of this statement I have received		\$	949.00	
	Balance Due		\$	0.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed compet	nsation with any other person	unless they are me	mbers and associates	of my law firm.
	I have agreed to share the above-disclosed compensat copy of the agreement, together with a list of the name				y law firm. A
5. I	n return for the above-disclosed fee, I have agreed to ren	der legal service for all aspect	s of the bankruptcy	case, including:	
b c.	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, states Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ment of affairs and plan which is and confirmation hearing, and educe to market value; exe his as needed; preparation	n may be required; and any adjourned he emption planning	earings thereof;	d filing of
6. B	y agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			ces, relief from s	ay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of any nkruptcy proceeding.	agreement or arrangement for	payment to me for	representation of the	e debtor(s) in
Αι	gust 15, 2016	/s/ Michael T. Bar	rett, Sr.		
Date		Michael T. Barret Signature of Attorne			
		James D. Huls &			
		530 Rockland Ro			
		Crystal Lake, IL 6 815-455-4755 Fa			
		michael@jdhuls.			
		Name of law firm			

Case 16-81934 Doc 1 Filed 08/15/16 Entered 08/15/16 12:27:45 Desc Main Document Page 55 of 60

United States Bankruptcy Court Northern District of Illinois

In re	Ryan Thomas Stern		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	45
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	tors is true and correct to the	he best of my
Date:	August 15, 2016	/s/ Ryan Thomas Stern Ryan Thomas Stern Signature of Debtor		

21st Century Insurance C/O Credit Collection Services Two Wells Avenue Newton Center, MA 02459

21st Century Insurance C/O Credit Collection Services Two Wells Avenue Newton Center, MA 02459

21st Century Insurance C/O Credit Collection Services Two Wells Avenue Newton Center, MA 02459

21st Century Insurance P.O. Box 55156 Boston, MA 02205

Acceptance Now 5501 Headquarters Drive Rent A Center Plano, TX 75024

Advocate Good Shepherd Hospital 450 West Highway 22 Barrington, IL 60010

Advocate Health and Hospitals Corp C/O Harris & Harris Ltd. 111 West Jackson Blvd Chicago, IL 60604-4135

Advocate Health and Hospitals Corp C/O Harris & Harris Ltd. 111 West Jackson Blvd Chicago, IL 60604-4135

Advocate Sherman Hospital 1425 N. Randall Road Elgin, IL 60123

Algonquin Lake In The Hills FPD P.O. Box 457 Wheeling, IL 60090

AT&T C/O Southwest Credit 4120 International Pkwy Suite 1100 Carrollton, TX 75007

Centegra Clinical Labs 13707 W. Jackson St, Woodstock, IL 60098

Centegra Health System P.O. Box 1990 Woodstock, IL 60098

Centegra Physician Care P.O. Box 37847 Philadelphia, PA 19101

Centegra Primary Care P.O. Box 37847 Philadelphia, PA 19101

Chase Card P.O. Box 15298 Wilmington, DE 19850

City of Crystal Lake Fire Rescue C/O NCInc. 3601 Algonquin Road, Suite 232 Rolling Meadows, IL 60008

Commonwealth Edison C/O Credit Protection Association P.O. Box 802068 Dallas, TX 75380

Dr. David Janes DDS 210 N. Madison St. Woodstock, IL 60098

Geico Casualty Company C/O Credit Collection Services Two Wells Avenue Newton Center, MA 02459 Geico Casualty Company P.O. Box 55126 Boston, MA 02205

Greater Elgin Family Care Center 860 Summit St. Elgin, IL 60120

Greater Elgin Family Care Center 370 Summit Street Elgin, IL 60120

Harris & Harris Ltd 111 West Jackson Blvd. Suite 400 Chicago, IL 60604

Internal Revenue Service U.S. Department of the Treasury Philadelphia, PA 19255

J.P. Morgan Chase C/O Firstsource Advantage LLC P.O. Box 628 Buffalo, NY 14240

Lake McHenry Pathology Assoc. 520 E. 22nd St. Lombard, IL 60148

McHenry County Circuit Clerk C/O Harris & Harris 111 West Jackson Blvd. Suite 600 Chicago, IL 60604

McHenry County Clerk C/O Alliance One 8589 Aero Drive San Diego, CA 92123

McHenry County Clerk C/O Alliance One 6565 Kimball Drive, Suite 200 Gig Harbor, WA 98335 McHenry County Clerk C/O Alliance One 8589 Aero Drive San Diego, CA 92123

McHenry County Clerk C/O Harris & Harris 111 West Jackson Suite 600 Chicago, IL 60604

McHenry County Clerk C/O Harris & Harris 111 W. Jackson Blvd. Suite 600 Chicago, IL 60604

McHenry County Clerk C/O Harris & Harris 111 West Jackson Suite 600 Chicago, IL 60604

McHenry County Clerk C/O Harris & Harris 111 West Jackson Suite 600 Chicago, IL 60604

Midland Credit Management 8875 Aero Drive Suite 200 San Diego, CA 92123

Northwest Collectors 3601 Algonquin Road Suite 23 Rolling Meadows, IL 60008

Oakwood Hills Police Department C/O Armor Systems Corp 1700 Kiefer Drive, Suite 1 Zion, IL 60099

Sherman Hosptial C/O MiraMed Revenue Group LLC Dept. 77304 - P.O. Box 7700 Detroit, MI 48277 T-Mobile C/O Southwest Credit Systems 4120 International Pkwy Suite 1100 Carrollton, TX 75007

Tri County Emergency Physicians P.O. Box 98 Barrington, IL 60011

URO Partners 3183 Paysphere Circle Chicago, IL 60674

Village Fox River Grove Photo Enforcement Program 75 Remittance Drive Suite 6658 Chicago, IL 60675

Village of Fox River Grove C/O Bonded Collection Corporation 29 East Madison St. Suite 1650 Chicago, IL 60602

Wellington Radiology Group, S.C 39006 Treasury Ctr Chicago, IL 60694